



TRANSACTION SLIP

Date: _____

Send

Receive

SENDER

Name: _____

Cellphone No.: _____

RECEIVER:

Name: _____

Cellphone No.: _____

REFERENCE NUMBER/ACCOUNT NUMBER (16 Digits)

_____ - - - -

Amount: _____
Service Fee: _____ Total: _____

Customer Signature Agent Signature



TRANSACTION SLIP

Date: _____

Send

Receive

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Cellphone No.: _____

RECEIVER:

Name: _____

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REFERENCE NUMBER/ACCOUNT NUMBER (16 Digits)

_____ - - - -

Amount: _____
Service Fee: _____ Total: _____

Customer Signature Agent Signature



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